

REGIMENTAL DOCUMENTS

**S**

NAME **BABCOCK, FRED ALTON**

REGT. NO. **2476452**

UNIT **3<sup>rd</sup> Hd Amb**

H. Q. FILE NO.

**CONTENTS**

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505  
REFERENCE

NON-EFFECTIVE BY

**DEATH**

Category

**DISCHARGE**

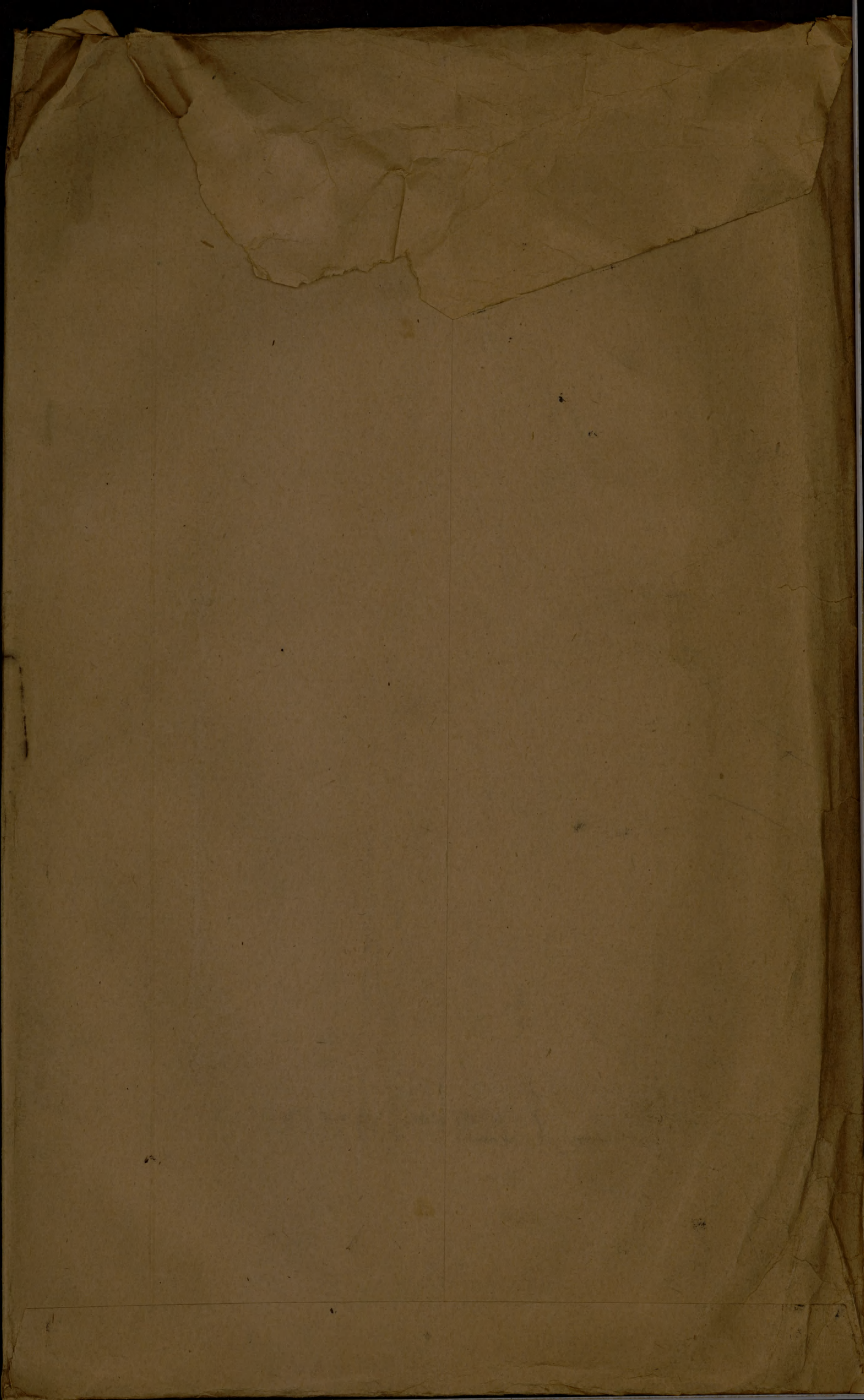
Category

*Disch*

**DESERTION**

**M**  
**H**

- 24 ATTESTATION PAPER (M.F.W. 23, 133, or 51)
- 2 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)
- TRAINING HISTORY SHEET (M.F.W. 113)
- 1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)
- 1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)
- 1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)
- 2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)
- 1 DENTAL HISTORY SHEET (M.F.B. 465)
- 1 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)
- 1 MEDICAL EXAMINATION (M.F.W. 129)
- TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)
- PROCFEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)
- DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)
- LAST PAY CERTIFICATE (M.F.W. 44)
- 1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)
- PARTICULARS OF CHARACTER (A.F.W. 3226)
- 1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)
- 21 *CD3*
- 1 *M JW 67*



CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... Babcock,
- 1a. What are your Christian names?..... Fred Alton,
- 1b. What is your present address?..... 1350 Russell Ave. North Minneapolis
- 2. In what Town, Township or Parish, and in what Country were you born?..... Fort Francis, Ontario, Canada.
- 3. What is the name of your next-of kin?..... Mattie Babcock,
- 4. What is the address of your next-of-kin?..... 1350 Russell Ave. North Minneapolis
- 4a. What is the relationship of your next-of-kin?..... Mother,
- 5. What is the date of your birth?..... August 29th 1891
- 6. What is your Trade or Calling?..... Machinist,
- 7. Are you married?..... No
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
- 9. Do you now belong to the Active Militia?..... No
- 10. Have you ever served in any Military Force?..... No
- 11. Do you understand the nature and terms of your engagement?..... Yes
- 12. Are you willing to be attested to serve in the } CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } Yes
- 13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? .. No
- 14. If so, what was the nature of the disability? .. --
- 15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?..... No
- 16. If so, what was the reason?..... --

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Fred Alton Babcock, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Fred Alton Babcock (Signature of Recruit)

Date July 26th 1917. Rich Alton (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Fred Alton Babcock, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Fred Alton Babcock (Signature of Recruit)

Date July 26th 1917. Rich Alton (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at Winnipeg, this 26th day of July 1917

(Signature of Justice)

**Description of Fred Alton Babcock, on Enlistment.**

Apparent Age 25 years ..... months.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.  
 (Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

Height ..... 5 ft. 6 ins.  
 Chest measurement { Girth when fully expanded ..... 35 1/2 ins.  
 { Range of expansion ..... 3 ins.  
 Complexion ..... Dark  
 Eyes ..... Gray  
 Hair ..... Dark Brown,

Religious denominations.  
 { Church of England .....  
 { Presbyterian .....  
 { Methodist ..... Yes  
 { Baptist or Congregationalist .....  
 { Roman Catholic .....  
 { Jewish .....  
 { Other denominations .....  
 (Denomination to be stated.)

Vision R. Eye ..... 20/20  
 " L. Eye ..... 20/20  
 Hearing R. Ear ..... normal  
 " L. Ear ..... normal

**CERTIFICATE OF MEDICAL EXAMINATION.**

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him\* Fit for the Canadian Over-Seas Expeditionary Force.

Date July 26th 191 7

Place Winnipeg, Man. Canada.

*[Signature]*  
 Medical Officer.

\*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

Mobilization  
 Medical Board  
 Approved Fit AUG 3 1917  
*[Signature]* President  
*[Signature]* Member  
*[Signature]* Member

**CERTIFICATE OF OFFICER COMMANDING UNIT.**

Fred Alton Babcock, having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

*[Signature]* Major  
 (Signature of Officer)  
 O.C. A.M.C. T.D. No.10

Date ~~August~~ July 26th 191 7

# CANADIAN EXPEDITIONARY FORCE

## DISCHARGE CERTIFICATE

War Service Badge  
Class "A" No. 185889

THIS IS TO CERTIFY that No. 2476452 (Rank) Pte  
Name (in full) Babcock, Fred. Alton enlisted in  
the C. A. M. C.  
CANADIAN EXPEDITIONARY FORCE at Winnipeg on the 26<sup>th</sup>  
day of July 1917.  
HE served in 3<sup>rd</sup> Can. Trench Amb. Co. France  
and is now discharged from the service by reason of Demobilization R.O. 1420 (c)  
Medical Unfitness.

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:

Age 27

Height 5 ft. 6 ins

Complexion Dark

Eyes Grey

Hair Dark Brown

Fred. C. Babcock

Signature of Soldier

Marks or Scars

Scar across bridge nose

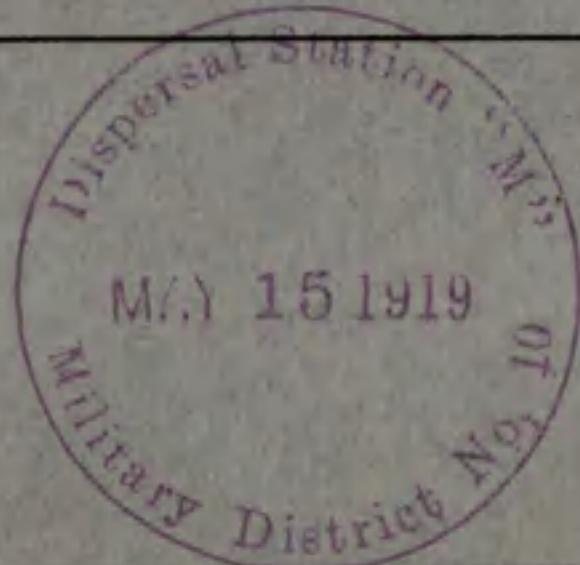
pre-war

Scar L hand

J. A. Leach

Issuing Officer

Date of Discharge



Rank

Date May 15 1919

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

This certificate is to be filled out by the commanding officer of the unit to which the soldier is assigned and is to be returned to the Adjutant General's Office, War Department, Washington, D.C.

Name of Soldier		Date	
Rank		Regiment	
Signature of Soldier		Signature of Officer	
Height		Weight	
Complexion		Hair	
Eyes		Build	
THE DESCRIPTION OF THIS SOLDIER ON THE DATE HE WAS DISCHARGED FROM THE SERVICE BY THE COMMANDING OFFICER OF HIS UNIT IS AS FOLLOWS:			
<p>1 - The discharge certificate must be given to the soldier within 30 days after discharge, or when he is discharged from the service, or when he is discharged from the service by the commanding officer of his unit.</p> <p>2 - That uniform worn by the soldier at the time of discharge, or when he is discharged from the service, or when he is discharged from the service by the commanding officer of his unit, must be worn only thirty days after discharge, or when he is discharged from the service, or when he is discharged from the service by the commanding officer of his unit.</p> <p>3 - That uniform worn by the soldier at the time of discharge, or when he is discharged from the service, or when he is discharged from the service by the commanding officer of his unit, must be worn only thirty days after discharge, or when he is discharged from the service, or when he is discharged from the service by the commanding officer of his unit.</p>			
Name of Officer		Signature of Officer	
Rank of Officer		Signature of Officer	
THIS IS TO CERTIFY THAT THE ABOVE IS A TRUE AND CORRECT STATEMENT OF THE FACTS AS STATED TO ME BY THE COMMANDING OFFICER OF THE UNIT TO WHICH THE SOLDIER IS ASSIGNED.			

# DISCHARGE CERTIFICATE

## CANADIAN EXPEDITIONARY FORCE

# MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 2476467 Rank Pte Surname Babeock  
(Given name in full)

Unit or Corps 3 Coy Royal Pnt Birthplace Frest. Alton  
Minneapolis USA

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer).

1. GENERAL DESCRIPTION:

Physique Good Weight 151 lbs. Height 5 7/8 ft. Colour of Eyes Blue  
 Nutrition Good  
 Pulse 78 regular  
 Condition of arteries Left  
 Vision Rt. 6/12 Left 6/12  
 Hearing (conversational voice) Rt. 20 ft. Left no ft.

Identification marks, scars, or deformities.  
 (Give cause and date of origin).  
scar across bridge of nose previous and scar on left hand.

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System no Cardio-Vascular System no  
 Special Senses no Integumentary System no Respiratory System no  
 Disturbance of mentality no Muscular System no Digestive System no  
 Osseous and Joint System no Any other general condition no

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

**EXAMINATIONS.**

**THIS SECTION FOR USE OVERSEAS—**

Examined at ..... (Overseas)

Date ..... 3/13/19

Signed ..... J. W. Dearless M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature ..... Fred. A. Babcock

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

**THIS SECTION FOR USE IN CANADA—**

Examined at ..... (Canada)

Date .....

Signed ..... M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to, or during service.

Signature .....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

[OVER]

Geo. E. M.



33

79

CLASS ORIGINAL  
MEDICAL HISTORY SHEET

Surname Babcock Christian Name Fred Alton

Examined on 26 day of July 1917  
at Minneapolis, Minn.

Approved by [Signature]

AMC TRAINING DEPOT  
City or Town St. Francis  
County Out

Rank [Signature] M.O.

Apparent age NO 610

Trade or occupation Mechanic

Height 5 feet 6 Inches

Weight 131 1/2 lbs.

Chest measurement { Minimum 32 1/4 inches  
Maximum expansion 35 1/4 inches

Physical development Good

Small-pox Marks No

Vaccination Marks { Arm Right - Left +  
Number 1

When Vaccinated last 1915

(a) Marks indicating congenital peculiarities or previous disease

Date	Fit or Unfit	M.O.

Date	Result	VACCINATIONS	M.O.
<u>25/8/17</u>	<u>Ps.</u>	<u>[Signature]</u>	

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.	M.O.
<u>11/5/17</u>	<u>OK</u>	<u>[Signature]</u>	
<u>16/8/17</u>	<u>OK</u>	<u>[Signature]</u>	
<u>25/9/17</u>	<u>OK</u>	<u>[Signature]</u>	

Vision R. Eye 20/20  
(b) Slight defects but not sufficient to cause rejection  
L. Eye 20/20  
Hearing R. Ear Normal  
L. Ear Normal

Enlisted on 26th day of July 1917 at Winnipeg, Man. Canada.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>A.M.C.T.D.#10</u>	<u>2476452</u>		<u>July 26th, 1917</u>
Transferred to	<u>camco/sens</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	REMARKS

N.B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.



To be made out in duplicate.

AMC TRAIN'G DEPOT

H.Q. 54-21-23-53

NO 10

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins..... C. A. M. C.

T. D. No. 10.

(2) Regimental Number..... No. 2476452

(3) Full Name of Soldier..... Babcock, Fred Alton,

(4) Place of Birth..... Fort Francis, Ontario.

(5) Are you married, or not?..... Single,

(6) If married, state,  
(a) Full name of your wife.....

(b) Present Postal Address.....

(7) Are you a widower?.....

(8) Have you any children?.....

If so, give number of boys and girls.....

Also their names and ages.....

(9) Is your Father alive?.....**Yes**.....  
If so, state name and address.....**Henry R. Babcock, 1350 Russell Ave, North. Minneapolis, Minn.**

(10) Is your Mother alive?.....**Yes**.....  
If so, state name and address.....**Mattie Babcock, v" " "**

(11) If your Mother is a widow.....**No.**.....  
Are you her sole support, or not?.....**No.**.....

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.  
.....  
.....

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.  
.....  
.....  
.....

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.  
.....

(15) Are you insured?.....**No.**.....  
If so, in what Company?.....**-----**.....  
Have you made arrangements for payment of your Insurance premium.....**-----**.....  
If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date...**September, 8th, 1917.**

*Cam McKenzie*  
Officer Commanding.



B1537

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

- 1. Christian names Fred Alton 2. Surname Babcock
- 3. Rank Pte 4. Original Unit C.A.M.C. 5. Reg. No. 2476452
- 6. Address, in full, to which future payments of gratuity are to be forwarded  
1350 Russell Ave North  
Minneapolis Minn. U.S.A.
- 7. Date of enlistment in the C.E.F. 26<sup>th</sup> July 1917
- 8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. no
- 9. Relationship of such dependent. not applicable
- 10. Address, in full, of such dependent. not applicable
- 11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? no
- 12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
- 13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States?
- 14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service.
- 15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served. 20 mos  
C.A.M.C.
- 16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department. no
- 17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? no

*Sub*

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. *no*

*not applicable*

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid. *no*

*not applicable*

*data*

20. Have you been issued with a War Service Badge? If so what class?

21. Have you, during the present war, served in the Imperial Forces? *no*

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *no*

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *no*

(b) If so, was such reversion in consequence of misconduct or inefficiency? *not applicable*

24. Are you now serving in the C.E.F.? If not, give:—(a) Date of discharge

*15/5/19*

(b) Reason for discharge

*data*

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit.

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit.

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?

(b) If so, are you in receipt of full pay and allowances from that Department?

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *Fred. G. Babcock*

Place of Residence: *Minneapolis, Minn. U.S.A. 1350 Russell Ave. North*

Declared before me at: *Bronxville* Major *C. A. H. E.*

This *29<sup>th</sup>* day of *March* 19*19*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

*J. White*

*Major C. A. H. E.*

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
			<i>280 00</i>	<i>210 00</i>
			<i>70 00</i>	

Certified Correct.

District Paymaster.

LTR

Rank \_\_\_\_\_ Name **BABCOCK, Fred Alton** Reg'l No. **2476452**  
 If in perm. Corps, }  
 What Unit? }  
**Dft No. 84 AMCTD No. 10 to AMCTD** Married or Single **Single.**  
 Place and Date of Enlistment **Winnipeg, July 26th, 1917** Place of Birth **Fort Francis, Ont. Canada.**  
 Name and Address, Next-of-Kin **Mattie Babcock,**  
**1350 Russell Ave., <sup>North</sup> Minneapolis Minn, USA.** Relationship **Mother.**  
 Assigned Pay Monthly \$ \_\_\_\_\_ Payable to \_\_\_\_\_ Relationship \_\_\_\_\_  
 Separation Allowance \$ \_\_\_\_\_ Payable to \_\_\_\_\_ Relationship \_\_\_\_\_  
 Discharge, Date and Place \_\_\_\_\_ Reason **I** Character \_\_\_\_\_

N/E. R.B. No **9211**  
 File R. **LOR CAN**  
 Category \_\_\_\_\_

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
		Arrived in England		7-12-17	S/S SCOTIAN
15-12-17	6 AMB	T.O.S from Canada	Pte Shorncliffe	20-11-17	Pri DO. 349. cancelled
22-2-18	do	W.S on pro of seas	" do	21-2-18	53. Pri DO. 11 4/27/18 cancelled
23-3-18	#36. Hld Amb.	T.O.S from 6 AMB Genl.	" Field	8-3-18	13. Pri DO. 18 23/2/18.
31-3-19	---	Emb. to leave for Eng. 22.30 hrs	---	27-3-19	15
31-3-19	Wing. Col.	W.S from 3rd Flt pending RTB	Pte B'shott	28-3-19	11.
30/4/19	✓	W.S to Canada	" "	26/4/19	17

A.F.B. 103 CHECKED  
 2 FEB. 1918





Fill in Only.—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 103.)

# Casualty Form—Active Service.

250M.—1-16.  
H. Q. 1772-39-920.

Unit, Regiment or Corps *24<sup>th</sup> C.A.M.C. T.D. No. 10 to Canada*

Regimental No. *2476452* Rank *Private* Name *Fred Alton Babcock,*

C. E. F.

Enlisted (a) *Jul. 26 '17* Terms of Service (a) *C.E.F. Dofw* Service reckons from (a) *July 26th 1917*

Date of promotion to present rank. } Date of appointment to lance rank. } Numerical position on roll of N. C. Os. }

Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (*Military None / Civil Machinist.*)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				

AMC TRAIN'G DEPOT *Halsbury*

NO IC

EMBARKED

DISEMBARKED

C.A.M.C. *D*

TAKEN ON STRENGTH *from*

*Canada*

CAMCD

S.O.S. to Overseas

*S'cliffe* *Shorncliffe*

*21-2-18 Part 2 D.O. 53*

DISEMBARKED

HAVRE

Having arrived

as Reinforcement is taken

on the strength of *AMC Co*

*To ADMS 1<sup>st</sup> Div*

*Posted to 3 CFAmb*

*taken on Strength.*

Field

21-2-18

*MR. Pb II 11 d/27 2/18*

7-3-18

*MR. B213 } Pb II 18 d/23 3/18*

8-3-18

*" " 13 " 23 1/8*

CERTIFIED CORRECT,  
28 FEB 1918  
CAN. RECORDS, LONDON.

9. 3. 18.

3 CFAmb

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.  
(b) e.g. Signaller, Shoening Smith, etc., etc., also special qualifications in technical Corps duties.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
	<i>C.C. Hoare</i>	<i>Proceeded to Eng,</i>		<i>27/3/19</i>	<i>N. R. pt II 0 1919</i> <i>Lieut.</i> <i>for Lt. Col., AAG.,</i> <i>Canadian Section</i>
<i>26/4/19</i>		<i>S.O.S. OF O.M.F.C. ON PROCEEDING TO CANADA.</i>	<i>Bramshott</i>	<i>30/4/19</i>	<i>PT II 0 1919</i> <i>EMPERESS OF BRITAIN</i> <i>EMBARKED 26-4-19</i> <i>WING CDN. CORPS CAMP.</i>
<i>26-4-19</i>		<i>T.O.S. of No. 10 District Depot,</i> <i>Part 2 Order No. 129 Para 2</i> <i>H. G. Pelton Major</i> <i>O. C. No. 10 District Depot.</i>			

Fill in only.—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 103:

500M.—9-16

H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps C. A. M. C.

Regimental No. 2476452 Rank Pte Name Babcock Fred alton  
C. E. F.

Enlisted (a)..... Terms of Service (a)..... Service reckons from (a).....

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }

Extended..... Re-engaged..... Qualification (b).....

Report		Rec rd of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		26.4.19.....T.O.S. Dispersal Station M		20 137	Par 2
		and Dispersed.....15-5-19.....		do	3
		<i>Received</i> Lieut. for O. C. 10 District Depot.			

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

Casualty Form - Active Service

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				

# CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) BARBOCK, F.A.

REGIMENT 3<sup>rd</sup> Amb RANK Pte No. 2476452

Date of Examination in England 29/3/19 Date of Examination in France \_\_\_\_\_

### DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated

*JHM*



### PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS
3. CROWNS
4. DENTURES
  - (a) Full Upper
  - (b) Part Upper
  - (c) Full Lower
  - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? \_\_\_\_\_

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

- (a) ~~In Canada~~
- (b) ~~In England~~
- (c) In France yes

BRAMSHOTT CAMP  
HANTS.

Signature of Dental Officer *J. M. [Signature]*

3197 Quid  
RABBIT  
FA  
192  
244422

form

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

# B

16

Spec 1 1917

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

15			
----	--	--	--

*gmr*

### PARTICULARS OF SEPARATION ALLOWANCE

No. 2476452  
 Rank Pte. Promoted Reverted Discharge  
 Soldier's Name Fred Allen Babcock  
 Battalion A. In. Co. T. S. 10  
 Beneficiary  
 Relationship  
 Address

### PARTICULARS OF ASSIGNMENT

Name Mattie Babcock  
 Address 1350 Russell Ave. St. Minneapolis  
 Change of Address Minn. U.S.A.  
 1  
 2  
 3  
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917 Dec	F 57155		15	15	<i>S M</i>
1918 Jan/18	A 61977		15	15	<i>M</i>
July	B 95014		15	15	
March	A 91358		15	15	<i>✓</i>
Apr	I 8102		15	15	<i>D.</i>
May	C 9476		15	15	<i>D.</i>
June	Z 7250		15	15	<i>D.</i>
July	Z 18289		15	15	<i>b</i>
Aug	Z 30260		15	15	<i>b</i>
SEP	Z 43360		15	15	<i>b</i>
OCT	Z 57829		15	15	<i>a.</i>
NOV	Z 72347		15	15	<i>✓</i>
DEC	Z 93296		15	15	<i>✓</i>
Jan/19	Z 103239		15	15	<i>a</i>
Feb	Z 117137		15	15	
MAR	Z 129693		15	15	
APR	Z 18993		15	15	
MAY	Z 9394		15	15	<i>W</i>
			270	270	

664-F-10

**AUDITED.**

A/c Closed 21-5-19  
 Ret'd per Empress of Britain  
 Date 4-5-19 M.F.W. 187 hus 10  
 Clerk Ray hus 101224

M. F. W. 128  
 40096-6-17-1772-39-1141  
 L. L. 22320-M. & D. 7592.







SURNAME. *Babcock*CHRISTIAN NAMES *Fred Alton*REGL. NO. *2476452* RANK *Pte.*UNIT *C.A.M.C. (Y.D. No. 10) (13<sup>th</sup> RD)*FORMER CORPS *nil.**GoS 15/5/19 Remot*  
*Do 137 17-5-19*

## NEXT OF KIN.

NAMES IN FULL *Babcock, Mrs. Mattie*RELATIONSHIP TO SOLDIER *Mother*ADDRESS *1350 Russell Ave, North Minneapolis,  
Minn., U.S.A.*

## CHANGE OF ADDRESS

COUNTRY OF BIRTH *Canada Fort Frances, Ont.* DATE *Aug. 29<sup>th</sup> 1891*PLACE OF ATTESTATION *Winnipeg, Man.* DATE *July 26<sup>th</sup> 1917**O/S. 26-11-17  $\frac{10'10}{2}$* *9/6.4-5-19.  $\frac{313}{39}$  Pte. "M" 10*

From Halifax Rev S.S. Scotian 26-10-17

MARRIED

SINGLE *Yes*

WIDOWER

TRADE OR CALLING

*Machinist-*

RELIGION

*Methodist-*

DESCRIPTION.

APPARENT AGE

*25-*

YEARS

MONTHS

HEIGHT

*5-*

FEET

*6*

INCHES

CHEST MEASUREMENT

*35-1/2*

INCHES

EXPANSION

*3*

INCHES

COMPLEXION

*Dark*

EYES

*Grey*

HAIR

*dk. Brown*

DISTINGUISHING MARKS

*nil.*

MEDICAL EXAMINATION.

PLACE

*Winnipeg. Man.*

DATE

*July 26<sup>th</sup> 1917*

*Present Address 1350 Russell Ave. North Minneapolis,  
Minn., U.S.A*

No. 2476452 RANK Pte

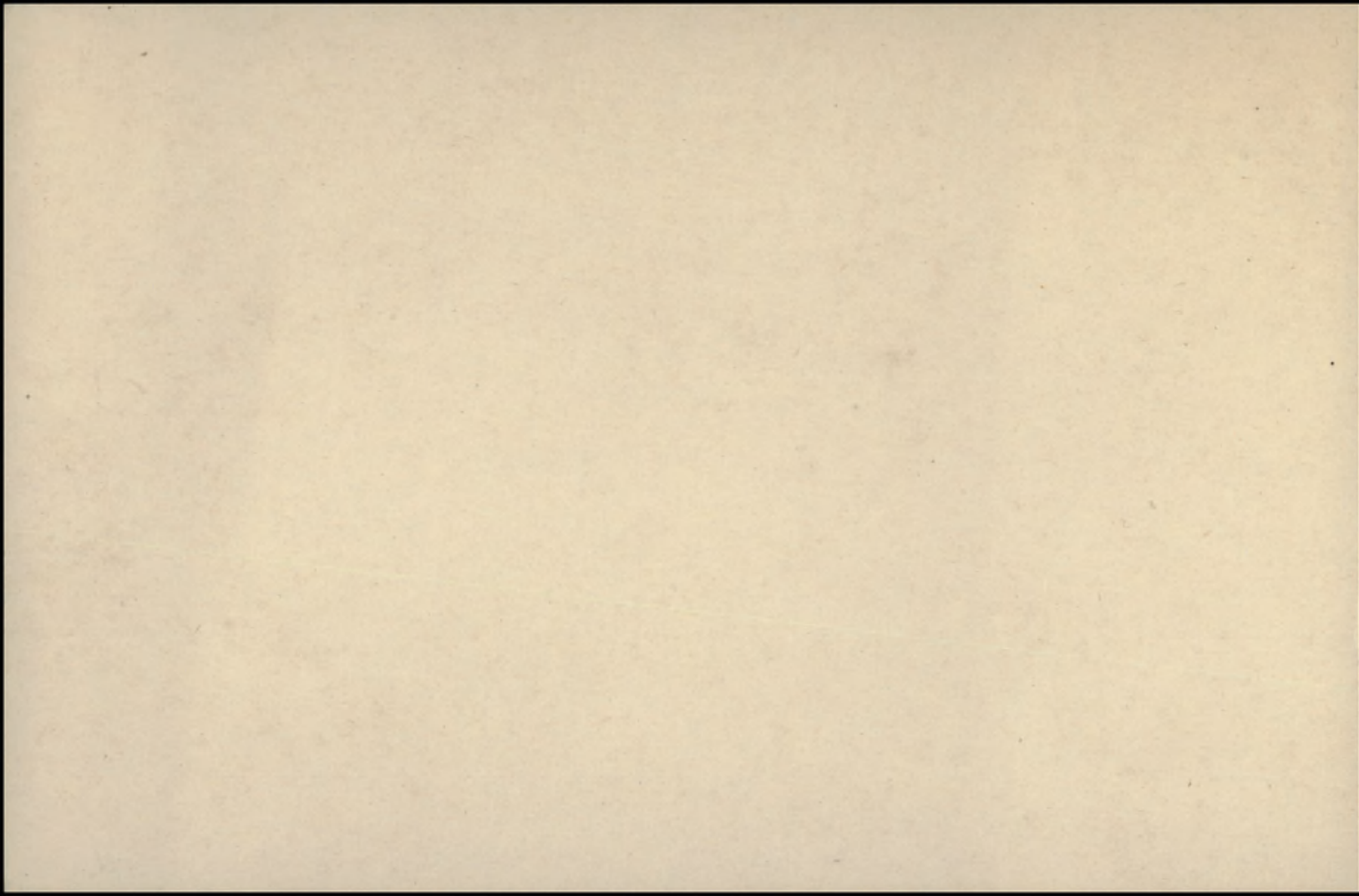
NAME Babcock, Fred, A.

T. O. S. 26-7-17 00  
15-3 of 4-8-17

UNIT 110 Training Depot Am C.

M. D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918 July 26	1918 Aug 31	N		
	Sept	N	24 ch of 15-11-17	
	Oct	N	Proceeded of	20241 of 15-11-17
	Nov	N	14-11-17	



Number 2476452 Rank Plt

Surname BABCOCK

Christian name Fred. Alton

Units C.A.M.C. Theatre of War France

Date of Service 21-2-18

Remarks

Latest Address 1350 Russell Ave N.

Minneapolis, Minn 554

Roll No. B. Page 20142.

200m. -6-21...

(This form to be filled in by all ranks on voyage to Canada.)

.....

R	RANK	SURNAME	INITIALS	UNIT
.....	.....	.....	.....	.....

al address.....  
 (Street) (City or Town) (Province)

one person to be notified of arrival.....  
 .....

Station in Military District to which a furlough warrant is required.....

..... Railway.....

d, is your wife on board..... Number of children on board.....

.....  
 tination.....

(Sgd )

DESP FEB 1 1923  
 REG NO. 11159

**LIST OF DISCHARGE DOCUMENTS.**

Attestation Paper, Triplicate..... Militia Form W. 23  
 or Particulars of Recruit..... Militia Form W. 133  
 Field Conduct Sheet..... Militia Form W. 178 or A.F.B. 122  
 Casualty Form..... Militia Form W. 54 or A.F.B. 103  
 Last Pay Certificate..... Militia Form W. 44  
 Certificate that missing documents are unobtainable.....  
 Medical History Sheet..... Militia Form B. 313 or A.F.B. 178  
 Proceedings of Medical Board..... M.F.B. 227, A.F.B. 179 or A.F.A. 45  
 Dental History Sheet..... Militia Form B. 465  
 Medical Report..... M. F. W. 129 or D. M. S. 1375  
 Regimental Conduct Sheet..... Militia Form B. 263  
 Company Conduct Sheet..... Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23), of Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Medical Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (A.D. 5009a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings of Medical Board (M.F.B. 227)
8. Discharge Certificate (M.F.W. 44) (Proposed Discharge Certificate (M.F.W. 5009a)).
9. Copy of Discharge Certificate (M.F.W. 5009a).
10. Dispersal Certificate (A.D. 5009a).
11. Equipment Statement Q.M.G. Form (D.O.S. 2), and Clothing.
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group B  
 Checked by No. Tom  
 Date 23 APR 1919

War Service Class  
 Occupational Group No. 23  
 SHORT SERVICE  
 DISCHARGE

M

1. No. 2476452

2. Rank. Pte

3. Name. Babcock Fred Alton

4. Unit. 3<sup>rd</sup> Field Amb.


5. Date of Discharge 15-5-19 Place Winipeg M.

6. Reason for Discharge Demobilization

7. Authority. DO 137

8. Proposed Residence after Discharge Winipeg Man  
1350 Russell Ave North  
Minneapolis, Minn. U.S.A.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.  
 I hereby acknowledge that at the undernoted place and date I received my discharge Certificate  
 M. F. W. ?  
Fred. C. Babcock Signature of Soldier.

10. CONFIRMATION.  
 The discharge of the above named man is hereby confirmed.  
 Place.....  
 Date.....  
  
J. J. Sack Signature (O. C. Discharging Unit.)







\* Strike out whichever inapplicable.

ASSIGNED PAY. ENGLAND OR CANADA. SEPARATION ALLOWANCE. ENGLAND OR CANADA.

NAME: *BABCOCK, Fred Alton*  
NUMBER: *2476452*

EFFECTIVE DATE: *1.12.17*  
AMOUNT: *15.00*

PARTICULARS OF RANK OR APPOINTMENT

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

AUTHORITY | DATE EFFECTIVE | RANK OR APPOINTMENT

*Mattie Babcock  
1350 Russell Av. N.  
Minneapolis, U.S.A.  
mother*

*Pte*

UNIT AND TRANSFERS

*Not effective 1.5.19*

ORIGINAL UNIT: *CAME Depot*  
DATE ACCOUNT FIRST OPENED: *1.12.17*

AUTHORITY | DATE EFFECTIVE | DATE LEDGER SHEET T 57 D | UNIT TRANSFERRED TO

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<i>13.3.19</i>	<i>3975</i>	<i>Lioca.</i>	<i>3.15</i>				
<i>1.4.19</i>	<i>311</i>	<i>Traveling BCE</i>	<i>75.-</i>				
			<i>76.75</i>				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBSCE ALL'CE
	<i>1</i>	<i>10</i>		

PARTICULARS OF RENDERING NON-EFFECTIVE: *IN CAN 30419 MR 56026 Bahott 3419 Bahott MD 10*

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>Nov 18</i>									<i>25.28</i>	<i>nil</i>	
<i>Nov 31</i>									<i>58.28</i>		
<i>Apr P.P.</i>		<i>33</i>		<i>AR 3: 4/4/18 1st D. 7A A1</i>	<i>4.46</i>				<i>53.82</i>		
				<i>157 16/4/18 do A4</i>	<i>3.57</i>				<i>50.25</i>		
								<i>15</i>	<i>35.25</i>		
		<i>33</i>			<i>8.03</i>			<i>15</i>			
<i>May P.P.</i>		<i>34.10</i>							<i>69.35</i>		
				<i>AR 486 15/5/18 107A A6</i>	<i>4.46</i>			<i>15</i>	<i>54.35</i>		
				<i>505 " " A6</i>	<i>3.57</i>				<i>49.89</i>		
		<i>34.10</i>			<i>8.03</i>			<i>15</i>	<i>46.32</i>		
<i>June P.P.</i>		<i>33</i>							<i>29.32</i>		
				<i>AR 75 2/6/18 107A A2</i>	<i>4.46</i>			<i>15</i>	<i>64.32</i>		
				<i>926 18/6/18 370mb A5</i>	<i>3.57</i>				<i>59.86</i>		
		<i>33</i>			<i>8.03</i>			<i>15</i>	<i>56.29</i>		
<i>July P.P.</i>		<i>34.10</i>							<i>75.39</i>		
				<i>AR 1316 15/7/18 107A A3</i>	<i>3.57</i>			<i>15</i>	<i>71.82</i>		
				<i>1158 5/7/18 " A1</i>	<i>4.46</i>				<i>67.36</i>		
		<i>34.10</i>			<i>8.03</i>			<i>15</i>			
<i>Aug P.P.</i>		<i>34.10</i>							<i>86.46</i>		
				<i>AR 1616 2/8/18 107A A2</i>	<i>4.46</i>			<i>15</i>	<i>82</i>		
				<i>1724 15.8.18 " A6</i>	<i>3.57</i>				<i>78.43</i>		
		<i>34.10</i>			<i>8.03</i>			<i>15</i>			
				<i>Forward</i>							

*NKM shown*

NUMBER 2476452 RANK *P6*

NAME BARCOCK, Fred Alton

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	Balance								7843		
<i>Aug</i>	<i>PP</i>	<i>33</i>							9643		
				<i>MR 2038 20/9 107A 27</i>	<i>714</i>			<i>15</i>	<i>8929</i>		<i>MR</i>
		<i>33</i>			<i>714</i>			<i>15</i>			
<i>Oct</i>	<i>PP</i>	<i>3410</i>						<i>15</i>	10839		
				<i>MR 2197 4/10 107A 26</i>	<i>373</i>				10466		
				<i>2338 14/10 " 224</i>	<i>373</i>				10093		
		<i>3410</i>			<i>746</i>			<i>15</i>			
<i>Nov</i>	<i>PP</i>	<i>33</i>						<i>15</i>	11893		
				<i>MR 2472 5/11 37 Amb 16</i>	<i>373</i>				11520		
				<i>2647 7/11 " 23</i>	<i>1306</i>				10214		
	<i>dic</i>	<i>3410</i>						<i>15</i>	12124		
	<i>Jan</i>	<i>3410</i>						<i>15</i>	14034		
<i>1919</i>		<i>10/20</i>						<i>45</i>			
<i>Feb</i>	<i>PP</i>	<i>3080</i>						<i>15</i>	15614		
				<i>2824 10/12 " 3</i>	<i>779</i>				14835		
				<i>2975 4/1 " 18</i>	<i>379</i>				14458		
				<i>3297 16/1 " 45</i>	<i>373</i>				14085		
				<i>3395 1/2 " 76</i>	<i>373</i>				13712		
				<i>3128 8/2 10 J 78</i>	<i>1866</i>				11846		
	<i>MAN</i>	<i>3410</i>			<i>373</i>			<i>15</i>	13756		
<i>April</i>	<i>PP</i>	<i>6490</i>		<i>MAN 3975 13/3 37A 173</i>	<i>373</i>			<i>15</i>	13383		
					<i>4141</i>			<i>30</i>			
<i>Apr</i>	<i>Apr</i>	<i>33</i>						<i>15</i>	7883		
		<i>33</i>		<i>711 1/4/4 9 Wing</i>	<i>673</i>			<i>15</i>			
					<i>73</i>			<i>15</i>			
				<i>Lot 2614 Sr 16</i>							

*Emp of Brit*

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

AUDITOR *[Signature]* PAYMASTER *[Signature]*

M. OR S. \_\_\_\_\_ REGT. No. *2476452* RANK *Pte* NAME (IN FULL) *Babcock F A*

ORIGINAL UNIT C.E.F. *b.a.m.b* IF IN P.F. WHAT UNIT? \_\_\_\_\_ (BLOCK LETTERS SURNAME FIRST)

ADDRESS *1534* \_\_\_\_\_ PLACE OF ATTESTATION \_\_\_\_\_ TRANSFERRED TO *Dis Str M* DATE *APR 26 1919* AUTHORITY *D O 134*

IS SEPARATION ALLOWANCE PAID? *no* DATE EFFECTIVE \_\_\_\_\_ ASSIGNED PAY \$ *15.00* DATE EFFECTIVE \_\_\_\_\_

TO WHOM PAID \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ ANY CHANGE IN ASSIGNEE OR ADDRESS \_\_\_\_\_

ADDRESS \_\_\_\_\_ PAYABLE TO *Mattie Babcock* ADDRESS *1350 Russell Ave Nth Minneapolis Minn U.S.A.*

STOP PAYMENT FORM RENDERED, DATE \_\_\_\_\_ EFFECTIVE \_\_\_\_\_

DISCHARGED *M. D. 10* PLACE *M. D. 10* DATE *MAY 15 1919* REASON *D* AUTHORITY *D. O. 134* IF ENTITLED TO POST DISCHARGE PAY \_\_\_\_\_

MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS	
	NO. OF DAYS	RATE	AMOUNT				COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3							DEBIT	CREDIT				
<i>30/4/19</i>			<i>17.60</i>	<i>78 83</i>	<i>78 83</i>																	<i>78 83</i>	<i>BAL. ENG. L. P. O.</i>	
<i>1-16 5/19</i>	<i>16</i>	<i>12</i>	<i>35.70</i>	<i>78 83</i>	<i>78 83</i>					<i>4 87</i>			<i>15 -</i>										<i>176 56</i>	<i>Clothing Alice. 1st payment - W.S.G.</i>
					<i>201 43</i>															<i>201 43</i>			<i>Advances - Boat - Train</i>	
																								<i>A.P. chgd. on Eng. L. P. O. to May</i>
																								<i>Final CK to his</i>
				<i>N.S.S.</i>										<i>N.S.S.</i>										<i>1st Payment - W. S. G. as above</i>
<i>182 days @ rim</i>				<i>280 -</i>	<i>280 -</i>																			<i>10 days 8<sup>th</sup> of 1919</i>
<i>Jump 15 July 15</i>																								<i>40 - 2nd</i>
										<i>763965 70 -</i>														<i>70 - 3rd</i>
										<i>790661 70 -</i>														<i>68<sup>90</sup> Final</i>
										<i>Aug 15 13492 68<sup>90</sup></i>														
					<i>280</i>																			
										<i>27890</i>						<i>1<sup>10</sup></i>				<i>280</i>				

AUDITED  
AUG 14 1919  
Audit Clerk  
M. D. 10